



PLEASE NOTE
YOU MUST
COMPLETE THE
FOLLOWING:

Insert Title

Check Box If
Appropriate —
For Use Without
Specification
Attached

COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

ATTORNEY DOCKET NO.

1173-145P

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As a below named inventor, I hereby declare that: my residence post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or a joint inventor (if plural inventors are named below) of the invention entitled: * HUMAN DERIVED MONOCYTE ATTRACTING PURIFIED PROTEIN PRODUCT USEFUL IN A METHOD OF TREATING INFECTION AND NEOPLASMS IN A HUMAN BODY, AND THE CLONING OF FULL LENGTH cDNA THEREOF, for which a patent is sought, the specification of which is attached hereto unless the following box is checked:

The specification was filed on March 30, 1989
and was assigned Serial No. _____
and was amended on _____ (if known)
and was amended on _____ (if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

I do not know and do not believe the same was ever known or used in the United States of America before my or our invention thereof, or patented or described in any printed publication in any country before my or our invention thereof, or more than one year prior to this application, that the same was not in public use or on sale in the United States of America more than one year prior to this application, that the invention has not been patented or made the subject of an inventor's certificate issued before the date of this application in any country foreign to the United States of America on an application filed by me or my legal representatives or assigns more than twelve months prior to this application, and that no application for patent or inventor's certificate on this invention has been filed in any country foreign to the United States of America prior to this application by me or my legal representatives or assigns, except as follows:

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate listed below:

Prior Foreign Application(s)

Priority Claimed

Insert Priority
Information
(if appropriate)

→	(Number)	(Country)	(Month/Day/Year Filed)	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
	(Number)	(Country)	(Month/Day/Year Filed)	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
	(Number)	(Country)	(Month/Day/Year Filed)	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
	(Number)	(Country)	(Month/Day/Year Filed)	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
	(Number)	(Country)	(Month/Day/Year Filed)	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No

All Foreign Applications, if any, for any Patent or Inventor's Certificate Filed More Than 12 Months Prior To The Filing Date of This Application:

Country	Application No.	Date of Filing (Month/Day/Year)
_____	_____	_____
_____	_____	_____

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

(Application Serial No.)	(Filing Date)	(Status — patented, pending, abandoned)
(Application Serial No.)	(Filing Date)	(Status — patented, pending, abandoned)

*NOTE: Must be completed.